



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 2638

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/595,546	09/08/2008	210	1777	04914.0055-00000		
<b>RULE</b>						
<b>APPLICANTS</b> Jurgen Dannenmaier, Balingen, GERMANY; Hermann Goehl, Bisingen, GERMANY; Thomas Ertl, Bisingen, GERMANY; Jacques Chevallet, Serezin du Rhone, FRANCE; Francesco Ribolzi, Varese, ITALY; Bjorn Frederik Seidler, Scheebel, GERMANY; Lennart Jonsson, Furulund, SWEDEN; Eddie Nilsson, Hoor, SWEDEN;						
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP04/12528 11/05/2004						
<b>** FOREIGN APPLICATIONS *****</b> EUROPEAN PATENT OFFICE (EPO) 03025640.8 11/07/2003 EUROPEAN PATENT OFFICE (EPO) 03026854.4 11/24/2003 EUROPEAN PATENT OFFICE (EPO) 03026855.1 11/24/2003						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 09/30/2008						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/DIRK R BASS/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance <u>Initials</u>	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWINGS</b> 11	<b>TOTAL CLAIMS</b> 48	<b>INDEPENDENT CLAIMS</b> 11
<b>ADDRESS</b> NIXON & VANDERHYE, PC 901 NORTH GLEBE ROAD, 11TH FLOOR ARLINGTON, VA 22203 UNITED STATES						
<b>TITLE</b> INTEGRATED BLOOD TREATMENT MODULE						
<b>FILING FEE RECEIVED</b> 4100	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		